



\$170

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
(203.004-US)

In re Application of: **BALLERSTADT ET AL.** ) Group Art Unit: **1641**  
Serial No: **10/735,153** ) Examiner: **YU, MELANIE J.**  
Filed: **DECEMBER 12, 2003** )  
Title: **DEVICE AND METHOD FOR ANALYTE** )  
**SENSING** )


Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Certificate of Mailing under 37 CFR 1.8**

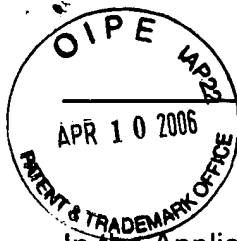
I hereby certify that the attached: **(1)** Amendment and Reply of April 4, 2006 (33 pages); **(2)** Fee Transmittal (1 page + 1 copy thereof); **(3)** Petition for Extension of Time (1 page); and **(4)** Check (\$510.00) are being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on April 4, 2006.

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Print Name of Person Signing Certificate



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
(Case No. 203.004-US)

In the Application of: **BALLERSTADT ET AL.**

Serial No: **10/735,153**

Filed: **DECEMBER 12, 2003**

Title: **DEVICE AND METHOD FOR ANALYTE SENSING**

)  
) Group Art Unit: **1641**  
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) Examiner: **YU, MELANIE J.**  
)  
)  
)

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**FEE TRANSMITTAL**

Dear Sir:

Transmitted herewith is an **Amendment and Reply of April 4, 2006** and **Petition for Extension of Time** (3 months).

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	Claims Remaining	Highest Number Previously Paid	Extra	Rate		Amount
				Large	Small	
Number of Claims	63	117	0	\$50.00	\$25.00	-0-
Independent Claims	3	4	0	\$200.00	\$100.00	-0-
Extension Fee: a) Three Month				\$1,020.00	\$510.00	\$510.00
TOTAL FEE DUE:						\$510.00

**Method of Payment:**

☒ [XX] A check payable to the Commissioner of Patents and Trademarks, in the amount of \$510.00 is enclosed as payment of the Total Fee.

☐ [ ] Please charge my Deposit Acc. 50-0763 in the amount of \$ \_\_\_\_\_ to cover the above fees. A duplicate copy of this sheet is enclosed.

☒ [XX] The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment to Deposit Acc. 50-0763. A duplicate copy of this sheet is enclosed.

Date: April 4, 2006

Respectfully submitted,

Neil Steinberg, Reg. No. 34,735  
Telephone No. (650) 968-8079